

LINDA LINGLE

HONOLULU

August 3, 2005

EXECUTIVE MEMORANDUM

MEMO NO. 05-02

TO:

All Department Heads

SUBJECT:

Supplemental Instructions for Executive Memorandum No. 05-01, "FY 06

Budget Execution Policies and Instructions"

Effective immediately, Item 14b.1 and 14b.4 (Manpower Control) in Attachment A of Executive Memorandum No. 05-01 (FY 06 Budget Execution Policies and Instructions) dated June 7, 2005, and certain procedures are amended and revised as follows:

Filling of Positions Vacancies (Attachment A, Item 14b.1, Workforce Control, Establishing and Filling of Position Vacancies):

Revised Policy

Delete Item 14b.1, Category 4 (extension of all exempt positions and all exempt appointments pursuant to Section 76-16(b)(2), (12) and (15), HRS), from the list of positions that require my prior approval through the Department of Budget and Finance (B&F). The item is being deleted from direct routing to B&F, as the extension of exempt positions pursuant to Sections 76-16(b)(2), (12) and (15), HRS, requires prior approval of the Department of Human Resources Development (DHRD) before submission to me through B&F. (Note: The category of positions is referenced in Item 14b.4.)

Filling of Positions Vacancies (Attachment A, Item 14b.4, Workforce Control, Establishing and Filling of Position Vacancies):

Revised Policy

DHRD has provided the departments with delegated authority to review and approve civil service exemptions for positions established under Section 76-16(b)(3), (10) and (17), HRS. Accordingly, **Item 14b.4** is revised as follows:

"Proposed actions to <u>establish or extend</u> positions that are exempt from civil service pursuant to Section 76-16(b) (2), (12), and (15), HRS, unless previously delegated to the departments, shall require the <u>prior review and approval of DHRD before</u> submission to me through B&F for approval to fill or extend exempt positions beyond their not-to-exceed (NTE) dates."

Revised Procedures for Approval (Attachment A, Item 14b.5)

All position requests requiring my approval for filling shall be submitted in the **revised** formats. In lieu of the current **Form B**, departments must submit either **Form B-1 or B-2**. **Form B-1** (a form which should not exceed one page) serves as a streamlined format to facilitate the filling of **authorized** vacant positions, while departments seeking the establishment, filling or extension of **unauthorized** positions should submit **Form B-2**. An "unauthorized position" is a position that is **not** included in Executive Budget Details for FB 2005-07 as amended by legislative worksheets for Act 178, SLH 2005.

Federal Funds (Attachment A, Item 9a)

• Revised Procedures for Approval (Attachment A, Item 9a)

Departments are required to prepare and submit Form E-3 (federal fund approval notice), which B&F will finalize and transmit to the Legislature. To comply with the five-day reporting period, departments should submit a draft hardcopy with its request and e-mail an electronic file of Form E-3 to the B&F analyst assigned to your department.

Other provisions, guidelines and policies of Executive Memorandum No. 05-01 remain in effect. Further, departments are reminded of the applicability of other pertinent provisions of law and other Executive Memoranda and Administrative Directives still in effect. Your cooperation in complying with these instructions is appreciated.

LINDA LINGLE

Attachments

REQUEST FOR POSITION ACTION						
A. Originating Departmen	B&F No.:					
1. TYPE OF ACTION REQUESTE A. Creation of New Position B. Fill Vacant Position C. Extend Position D. Other:	D:					
_	m tD/Org Code of position; Division/Brar	nch/Section (as applicable); and location):			
☐ Requested Position Action does not exceed appropriated FTE of program						
3. TYPE OF POSITION A. Permanent	☐ D. Temporary – Length and Period:					
B. Full Time	E. Part-Time – FTE:					
☐ C. Civil Service	☐ F. Exempt from Civil Service – Legal Authority:					
4. MEANS OF FINANCING: SPECIFIC NON-GENERAL FUND:						
5. POSITION NO., TITLE, PAY RA	NGE AND INCUMBENT:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
6. DATE OF VACANCY AND REASON FOR VACANCY:						
7. JUSTIFICATION FOR ACTION REQUESTED (Attach additional sheet if more space required):						
B. Department Review of	Request					
Division Head Signature	Date	ASO Signature	Date			
Department Head Signature						
C. Department of Budget	and Finance		· · · · · · · · · · · · · · · · · · ·			
BPPM Review: Approval		BC Initial:	Division Head Initial:			
RECOMMENDATION: APPROVED DISAPPROVED						
Remarks:						
Date		Director of Finance				
D. Office of the Governor	Date		Director of Finance			
□ APPROVED □ DISAPPROVED □ OTHER – SEE REMARKS BELOW						
Remarks:						
	Date		Governor			

(Date)

TO:

The Honorable Linda Lingle

Governor of Hawaii

THRU:

The Honorable Georgina K. Kawamura, Director

Department of Budget and Finance

FROM:

SUBJECT: Request to Establish and Fill (or Extend) Unauthorized Position

Approval is requested to establish and fill (or extend) the following unauthorized position:

- 1. Position Title:
- 2. Description of functions and responsibilities:
 - Note if position is unique; i.e., only position in the organization that performs the particular function.
- 3. Program ID/title; Division/Branch/Section (as applicable); location:
- 4. Salary and means of financing (general, special, federal, etc.; for other than general fund, indicate specific fund source):
- 5. Nature of appointment:
 - a. Projected appointment date:
 - b. Civil service/exempt:
 - c. Duration position needs to be filled:
 - d. Part or full-time (40 hrs. per week) (If part-time, indicate number of hours to work per week.):
 - e. If exempt, attach a copy of Department of Human Resources Development or delegated approval:

6.	Justification for establishing and filling	Justification for establishing and filling (or extending) the position:					
	(Provide specific, complete justification adverse impacts of delay in hiring; specthe public, etc.)	-					
7.	Attach organization chart reflecting where the requested position will be placed.						
8.	Department review of request:						
	a. Reviewed and approved by division or attached agency administrator:						
	Name	Telephone	Date				
	Signature	_					
	b. Reviewed and approved by departm	nent administrative ser	vices officer:				
	Name	Telephone	Date				
	Signature	_					
	c. Reviewed and approved by departm	ent head:					
	Signature	Telephone	Date				
RECO	OMMEND:						
☐ AI	PPROVAL DISAPPROVAL	☐ DEFER					
DIRE	CTOR OF FINANCE						
DATI	<u> </u>						

☐ APPROVED	☐ DISAPPROVED	☐ DEFER
LINDA LINGLE		
Governor, State of	Hawaii	
DATE		